

# **WIC Client Satisfaction Survey 2001 Report**

**State, Local Health District, & Clinic**

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# 2001 Utah WIC Client Survey Report

## INTRODUCTION

### **Purpose**

Each year, a survey of Utah's WIC clients is conducted to assess issues related to client satisfaction, utilization patterns and services. This year, the survey collected information about WIC utilization, clinic services, nutrition education, breastfeeding, the folic acid project, voucher use, and food selection and preference. The survey results are used to assist with program planning at the state and local levels. The data are summarized by statewide, local health district, and local clinics.

### **Methods**

The method of data collection for this study was a self-administered survey given to a convenience sample of WIC clients. During the months of August and September 2001, every Utah WIC clinic distributed surveys to all clients who entered the clinic on designated "regular service" days. Each clinic received a number of surveys proportional to their client base. Larger clinics surveyed about 7% of their total population, while smaller clinics surveyed about 15%. Clinic staff was instructed to give the survey to all clients and to remain neutral and not assist the participant in trying to clarify or explain their responses. They were asked to tell the participant to "answer the best they can".

The overall response rate was 90%. The response rate for English speakers was 96% compared to 79% for Spanish speakers. The total number of surveys completed was 3808. This value varies by individual question, depending on the number who actually answered the question.

### **Advantages and Disadvantages of the Survey Design**

The advantages of self-administered surveys are well documented. Some advantages include the ease of use and confidentiality. Because interviewers are not required, respondents do not have to divulge private information to a person. In general, this survey was fairly easy to implement, and the response rates were very high.

A disadvantage of using a self-administered survey is the inability for an interviewer to ensure that respondents understand the questions and answer appropriately regarding completeness, skip patterns, and quality of responses. Due to this inherent lack of quality control, self-administered surveys require very careful question design and are more prone to question bias than other methods such as telephone or in-person interviews.

One limitation of the design of this survey tool was that demographic information, such as gender, race, ethnicity, education level, socio-economic status, how long they were on WIC, or age was not collected. The only demographic data available is language preference (English or Spanish).

## Utah WIC Client Survey 2001

### Quick View

#### Clinic Performance and Services

- **87%** reported that WIC services were either “*excellent*” or “*very good.*”
- **40%** indicated that the clinic hours were satisfactory or worked for them.
- **66%** said the phone was answered quickly the last time they called during clinic hours.
- **35%** reported that close proximity of the clinics helped them to keep their appointments.

#### Nutrition Education

- **75%** said their eating habits changed because they were on WIC.
- **63%** of those with *infants* said what they fed their infant had changed since being on WIC.
- **70%** of respondents with *children* reported that what they fed their child had changed since they were on WIC.
- **87%** reported learning something new during nutritional counseling.
- **92%** reported learning something new at nutrition classes.
- **91%** said they have used WIC handouts and materials.
- **58%** of those who used handouts and materials said they mostly used handouts related to general nutrition information.

#### Breastfeeding

- **49%** of clients indicated that they have received help with breastfeeding.
- **54%** of breastfeeding clients said they received extra food through WIC that helped them with breastfeeding.

### Food Selection

- **51%** mentioned that the cashier at the grocery store *sometimes* told them that they had picked the wrong WIC foods.
- **60%** said they never had problems picking the least expensive brand of food.

### Voucher Use

- **95%** said the clinic explained to them how to use the vouchers at the store.
- **89%** had no problems using their vouchers at the grocery store.
- **13%** have used a proxy to cash vouchers at the store.
- **83%** of those who used proxy had no problems using a proxy to cash vouchers at the store.
- **42%** spent between \$11 - \$30 on other groceries when they used vouchers.

### Food Preference

- **49%** chose mild/medium cheddar as their favorite WIC cheese.
- **38%** chose apple as their favorite WIC frozen juice.
- **59%** did not think that brand name cereals were more nutritious than store brand cereals.

### Folic Acid Project

- **18%** reported they were part of the special project that gave them a free bottle of vitamins (with folic acid).
- **86%** of those in the special folic acid project reported that they took the multivitamins.
- **47%** of those in the special folic acid project said they finished the full bottle of multivitamins.

## STATEWIDE DATA SUMMARY

The following summary data are organized by category and question number, and where appropriate, by language preference. The total number of surveys collected was 3808. For each question, the total, or “n”, may be less than 3808 due to the number of clients who responded to the question so that a valid percent could be calculated. The “n” value also varies by English and Spanish and can be found in the tables in Appendix A. Those who completed the questionnaire in Spanish are referred to as “Spanish”, or “Spanish speakers”. Those who completed the questionnaire in English are referred to as “English”, or “English speakers”. These categories simply indicate language preference and can not be used to assume race or ethnicity. Overall, 69% of respondents completed questionnaires in English and 31% completed questionnaires in Spanish.

### Clinic Performance and Services

**Q29. Overall, WIC services are:** (n=3590)

When asked to rate WIC services, the majority of respondents, 87%, said that WIC services were either excellent or very good. Spanish speakers were more likely to choose “excellent” over “very good”, but overall, both groups had similar percentage of positive responses (See Appendix A). The results by local health district and clinics are provided in Appendix B-F.

**Q3. What clinic hours work best for you?** (n=3779)

Approximately 40% of respondents indicated that the clinic hours were satisfactory or “OK”. Mornings were the most popular specific time indicated (34%), and evenings followed at 18%. When English and Spanish speakers were compared, English speakers were more apt to choose evenings than Spanish speakers (21% vs. 12%). Spanish speakers were more likely to prefer Saturdays compared to English speakers (12% vs. 3%).

**Q4. What happened the last time you called during clinic hours?** (n=3604)

The majority of respondents indicated that the last time they called WIC the phone was answered quickly (66%). Approximately 30% experienced a negative outcome, such as the phone was busy (6%), received voice mail or an answering machine (13%), or was put on hold (11%). A small percent indicated “other” (5%). Not much variation was seen between English and Spanish speakers.

**Q5. What helped you keep your appointment?** (n=3682)

Proximity to the clinic and being reminded of the appointment were the most popular responses for what helped them to keep their appointment. Of the available choices, about 35% cited the close location, 34% cited the reminder, and 22% said they had transportation. Little variation was observed between English and Spanish speakers.

## WIC Utilization

### **Q1. Why did you come to WIC?**

Survey participants were asked to check all reasons that apply from a list of why they came to WIC. The following data indicate the percent that agreed with each reason listed for using WIC. The most popular reasons for using WIC were 1) to get extra food for their families (51%), 2) to learn about nutrition for themselves (50%), 3) to learn how to feed their children (42%), and 4) to have their child's growth checked (40%). The least popular reasons for using WIC were learning about breastfeeding (17%) and healthy pregnancies (28%).

### **Q2. Why do you think others don't apply for WIC?**

When asked to speculate why they thought others do not apply for WIC, respondents were able to check all reasons that apply from a list. The most popular reasons reported were because 1) they do not think they would qualify (62%), 2) they do not know about the program (57%), or 3) they were embarrassed (52%). Few indicated it would be due to other reasons such as being a hassle or difficulty accessing the clinic. For more details, refer to Appendix A (Statewide Data).

These data indicate that information and messages about WIC could be more effective if they focus on the greatest barriers to accessing WIC, such as increasing awareness of the program and who is eligible, and addressing issues related to shame or embarrassment.

## Nutrition Education

**Q6. Have your eating habits changed because you have been on WIC?** (n=3715)

Overall, about 75% of respondents indicated that their eating habits changed since being on WIC. Spanish speakers were more likely to answer yes compared to English speakers (88% vs. 69%).

**Q7. Has what you feed your infant changed since you have been on WIC?**

(n=2860 and excludes those who indicated not applicable)

Of those who had infants, 63% said that what they fed their infant has changed since being on WIC. A higher percentage of Spanish speakers indicated their infant's eating habits have changed (72% vs. 60%).

**Q8. Has what you feed your child changed since you have been on WIC?** (n=2882 and excludes those who indicated not applicable)

Of those who had children, 70% said that what they fed their child has changed since being on WIC. There was little variation between English and Spanish responses.

**Q11. When you met with the nutritionist for individual counseling, did you learn something new?** (n=3437)

The majority of respondents, 87%, indicated they learned something new when they met with a nutrition counselor. Ninety-five percent of Spanish speakers and 84% of English speakers said they learned something new.

It appeared from the data that those who reported learning something new during *nutrition counseling* also reported changing eating habits more often compared to those who did not learn anything new during nutrition counseling (78% vs. 53%).

**Q12. When you attended a nutrition class, did you learn something new?** (n=3553)

The majority, 92%, indicated they learned something new when they attended a nutrition class. Almost all Spanish speakers, 98%, said they learned something new. A lower percent, 90%, of English speakers said they learned something new.

**Q13. Have you ever used handouts or materials?** (n=3489)

The majority of the respondents (90%), used handouts regardless of language preference.

When this information was compared against changing eating habits, it was found that those who used (WIC educational) handouts or materials were more likely to change their eating habits, compared to those who did not use handouts (77% vs. 49%).

**Q14. What was the handout information on?** (n= 3165)

Respondents who reported using handouts were asked to choose from a list of all handout types used. Results were ranked by the percentage that said they used a handout on the topic listed. The most common used handouts were about general nutrition (58%), infant feeding (47%), and child feeding (43%). A modest amount used pregnancy (32%) and



breastfeeding information (31%). Close to one-fifth (18%) used information about what to do after you deliver a baby. There was little variation between English and Spanish speakers.

<b>Breastfeeding</b>
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**Q9. Did anyone help you with breastfeeding?** (n=1913)

Of those who were breastfeeding, 49% said they had received help with breastfeeding. Fifty-three percent of English speakers indicated they were helped, while a smaller percent of Spanish speakers said they were helped. A higher percent of Spanish speakers indicated they did not receive help when needed compared to English speakers (14% vs. 5%). This may need further investigation.

**Q10. How did we help you with breastfeeding?** (n=930)

Those who had received help were asked to select types of services they had used. Breastfeeding classes and getting extra food for breastfeeding moms were the most utilized services indicated by clients who breastfed. Services were ranked as follows: 1) extra food for breastfeeding moms (54%), 2) breastfeeding classes (51%), 3) support from WIC breastfeeding staff (36%), 4) support from peer counselors (24%), 5) getting a hand pump (20%), 6) getting an electric pump (10%), and 7) other (4%).

## Food Selection

Clients were asked a series of questions about their success in choosing the appropriate WIC foods. Overall, the responses were positive.

**Q19. How often has a cashier told you that you picked the wrong WIC foods?** (n=3536)

When asked how often they were told by a cashier that they picked the wrong WIC foods, 46% said never, 51% said sometimes, and 3% said almost every time. See Appendix A for comparison of English and Spanish.

**Q20. Do you have problems picking the least expensive brand?** (n=3593)

Overall, 60% said they never had a hard time picking the least expensive brand, 37% said they sometimes had trouble picking the least expensive brand, and 2% said they almost always had trouble picking the least expensive brand.

## Voucher Use

When asked about voucher use, very few respondents had problems and there was little variation in responses between English and Spanish speakers.

**Q21. Did the clinic tell you how to use your vouchers at the store?** (n=3606)

About 95% of respondents said they were told at the clinic how to use vouchers.

**Q22. Do you have problems using your vouchers at the store?** (n=3617)

Only 3% indicated they had problems using vouchers at the store.

**Q23. Have you ever used a proxy to cash vouchers at the store?** (n=3354)

About 13% (or 438 respondents) had used a proxy to cash vouchers.

**Q24. Did you have problems using a proxy?** (n=422)

Of those who had used a proxy, the majority (83%) reported that they had no problems.

**Q25. When you use your WIC vouchers, how much do you usually spend on other groceries?** (n=3385)

Forty-two percent of respondents usually spent between \$11 and \$30 on other groceries. Almost 22% spent \$50 or more.

## Food Preference

### **Q.26 Choose your favorite WIC cheese . (n=3567)**

Respondents favored cheddar and mozzarella cheeses when asked to choose from a list, 49% and 26% respectively. Monterey jack and colby jack each garnered about 10%. Colby and longhorn cheeses were the least popular.

### **Q.27 Choose your favorite WIC frozen juice. (n=3593)**

Apple (38%), orange (26%), and purple grape (13%) juices were the top three picks of respondents. Grapefruit was the least popular.

### **Q.28 Do you think that brand name cereals (i.e., Kellogg's, General Mills) are more nutritious than store brands (i.e., Western Family, Albertson's, Smith's)? (n=3436)**

More than half (59%) reported that name brand cereals were not more nutritious than store brands. However, 64% of Spanish speakers believed that name brand cereals were more nutritious while only 32% of English speakers thought so.

### **Q.30 Choose your 3 favorite WIC cereals: not all of these cereals are on WIC right now.**

The top five cereal choices were General Mills Kix, General Mills Cheerios, Post Honey Bunches of Oats, General Mills Chex, and Kellogg's Corn Flakes.

## Folic Acid Project

### **15. Were you part of the special project that gave you a free bottle of vitamins (with folic acid) in the clinic? (n=3515)**

Five hundred and seventy people, or 18%, indicated they were in the special project. Almost 4% were not sure whether they were part of the project or not.

### **16. Did you take these multivitamins? (n=552)**

Of those who have participated in the folic acid project, the majority (86%) said they took the multivitamins.

### **17. How much did you take? (n=458)**

Of those who took vitamins, 46% finished the bottle, 40% took part of the bottle, and 11% completed the bottle and got another bottle.

### **18. Why didn't you take them?**

Results were not reliable.

**APPENDIX A:**  
**Statewide Data Tables**

**APPENDIX B:**  
**Local Health District Data Tables**  
**for Bear River, Central, and Davis**

**Table 1: Surveys Completed by Each Local Health District**

<b>LHD ID</b>	<b>LHD Label</b>	<b># of Surveys Completed</b>
1	Bear River	266
2	Central	210
3	Davis	328
4	Salt Lake	1254
5	Southeast	73
6	Southwest	344
7	Summit	51
8	Tooele	102
9	Tricounty	70
10	Utah County	691
11	Wasatch	37
12	Weber-Morgan	371
<b>Total Response</b>		<b>3797</b>
<b>Missing</b>		<b>11</b>
<b>Total</b>		<b>3808</b>

**APPENDIX C:**

**Local Health District Data Tables  
for Salt Lake, Southeast, and Southwest**

**Table 1: Surveys Completed by Each Local Health District**

<b>LHD ID</b>	<b>LHD Label</b>	<b># of Surveys Completed</b>
1	Bear River	266
2	Central	210
3	Davis	328
4	Salt Lake	1254
5	Southeast	73
6	Southwest	344
7	Summit	51
8	Tooele	102
9	Tricounty	70
10	Utah County	691
11	Wasatch	37
12	Weber-Morgan	371
<b>Total Response</b>		<b>3797</b>
<b>Missing</b>		<b>11</b>
<b>Total</b>		<b>3808</b>



**APPENDIX D:**

**Local Health District Data Tables for  
Summit, Tooele, and Tricounty**

**Table 1: Surveys Completed by Each Local Health District**

<b>LHD ID</b>	<b>LHD Label</b>	<b># of Surveys Completed</b>
1	Bear River	266
2	Central	210
3	Davis	328
4	Salt Lake	1254
5	Southeast	73
6	Southwest	344
7	Summit	51
8	Tooele	102
9	Tricounty	70
10	Utah County	691
11	Wasatch	37
12	Weber-Morgan	371
<b>Total Response</b>		<b>3797</b>
<b>Missing</b>		<b>11</b>
<b>Total</b>		<b>3808</b>

## **APPENDIX E:**

### **Local Health District Data Tables for Utah, Wasatch, and Weber-Morgan**

**Table 1: Surveys Completed by Each Local Health District**

<b>LHD ID</b>	<b>LHD Label</b>	<b># of Surveys Completed</b>
1	Bear River	266
2	Central	210
3	Davis	328
4	Salt Lake	1254
5	Southeast	73
6	Southwest	344
7	Summit	51
8	Tooele	102
9	Tricounty	70
10	Utah County	691
11	Wasatch	37
12	Weber-Morgan	371
<b>Total Response</b>		<b>3797</b>
<b>Missing</b>		<b>11</b>
<b>Total</b>		<b>3808</b>

**APPENDIX F:**  
**Clinic Data Summaries**

**Table 2: Surveys Completed by Each Clinic**

Clinic ID	Clinic Label	# of Surveys Completed	English	Spanish
21001	Logan	191	142	49
21002	Brigham	42	38	4
21003	Tremonton	29	25	4
21004	Randolph	4	4	0
22101	Ogden	371	203	165
22201	Layton	245	213	32
22202	Bountiful	83	77	6
22302	South Main	162	99	63
22304	Southeast	152	111	41
22305	Shipp	362	215	147
22306	City	198	89	109
22307	Homeless	4	3	1
22308	Northwest	11	2	9
22311	Rose Park	194	45	149
22312	West Jordan	171	117	54
22401	Tooele	80	73	7
22402	Wendover	22	5	17
22601	Teen Mom	7	7	0
23101	Wasatch	37	27	10
24001	Nephi	25	25	0
24002	Delta	23	13	10
24003	Manti	47	37	10
24004	Richfield	44	44	0
24005	Junction	7	5	2
24006	Loa	13	13	0
24007	Fillmore	14	10	4
24009	Salina	10	10	0
24013	Mt. Pleasant	27	22	5
25001	St. George	83	62	21
25002	Cedar	100	98	2
25003	Kanab	15	15	0
25004	Panguitch	14	10	4
25007	La Verkin	46	41	5
25008	Hildale	60	60	0
25101	Beaver	26	21	5
26101	Vernal	46	45	1
26102	Roosevelt	24	24	0
27001	Price	15	14	1
27002	Castle Dale	18	14	4
27003	Moab	20	19	1
27004	Blanding	12	12	0
27014	Monticello	8	6	2
28001	Summit	51	16	35
29001	Provo	288	190	98
29002	Orem	203	136	67
29003	Payson	100	72	28
29006	American Fork	100	85	15
<b>Total Response</b>		<b>3804</b>	<b>2614</b>	<b>1187</b>
<b>Missing</b>		<b>4</b>	<b>5</b>	<b>2</b>
<b>Total</b>		<b>3808</b>	<b>2619</b>	<b>1189</b>